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## BIB DATA SHEET

CONFIRMATION NO. 5900

|   |   |  |                                  |  |                           |                                |
|---|---|--|----------------------------------|--|---------------------------|--------------------------------|
| <b>SERIAL NUMBER</b><br>09/991,774  | <b>FILING or 371(c)<br/>DATE</b><br>11/05/2001<br><b>RULE</b>   | <b>CLASS</b><br>370                                      | <b>GROUP ART UNIT</b><br>2619    | <b>ATTORNEY DOCKET NO.</b><br>01711/LH                       |                           |                                |
| <b>APPLICANTS</b><br>Shigenori Morikawa, Tokyo, JAPAN;<br><b>** CONTINUING DATA *****</b><br><b>** FOREIGN APPLICATIONS *****</b><br>JAPAN 2000-339491 11/07/2000<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b><br>12/05/2001                                   |   |  |                                  |  |                           |                                |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and Acknowledged <u>/BLANCHE WONG/</u><br>Examiner's Signature |   | <input type="checkbox"/> Met after Allowance<br>Initials | <b>STATE OR COUNTRY</b><br>JAPAN | <b>SHEETS DRAWINGS</b><br>9                                  | <b>TOTAL CLAIMS</b><br>13 | <b>INDEPENDENT CLAIMS</b><br>4 |
| <b>ADDRESS</b><br>FRISHAUF, HOLTZ, GOODMAN & CHICK, PC<br>220 Fifth Avenue<br>16TH Floor<br>NEW YORK, NY 10001-7708<br>UNITED STATES  |   |  |                                  |  |                           |                                |
| <b>TITLE</b><br>DATA COMMUNICATION TERMINAL FOR CONDUCTING DATA COMMUNICATION FOR A SET OF OBJECTIVE DATA TO BE TRANSMITTED/RECEIVED  |   |  |                                  |  |                           |                                |
| <b>FILING FEE RECEIVED</b><br>1224  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                  | <input type="checkbox"/> All Fees                            |                           |                                |
|   |   |  |                                  | <input type="checkbox"/> 1.16 Fees (Filing)                  |                           |                                |
|   |   |  |                                  | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                           |                                |
|   |   |  |                                  | <input type="checkbox"/> 1.18 Fees (Issue)                   |                           |                                |
|   |   |  |                                  | <input type="checkbox"/> Other _____                         |                           |                                |
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